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CANDIDATE'S SPECIAL REPORT

(to be filled by a candidate or his principal campaign committee)

This form is filed during the 20 day period immediately preceeding an election to report (1) all receipts from a single source in excess of \$500 by major office candidates, or in excess of \$250 by district or any other office candidates, and/or (2) any payments exceeding \$200 to any person who endorses candidates and who is required to file campaign finance disclosure reports.

| All candidates who have had any such tra- report any such transaction on this form with | nsactions within the 20 days immediatel hin 48 hours of the time the transaction | y proceeding an election are rec on occured. | quired to | |
|--|---|--|---------------------------------------|--|
| Hand deliver or mall to: CAMPAIGN FIN | ANCE, 8401 United Plaza Blvd., Sulte | 200, Baton Rouge, LA 70809-7 | 7017. | |
| Qualifying Name and Address of Candidate Hunter Greene 12203 LAKE SHERWOOD NORTH | Office Sought (Include title of office as well as parish, city, fown and/or election district) STATE REPRESENTATIVE EAST BATON ROUGE PARISH | OFFICE USE ONLY | | |
| BATON RÓUGE LA 70816 | DISTRICT 68 | 3/23 | 0502824 | |
| 3. Name and Address of Principal Campaign Committe (Applicable only if candidate has a principal campaign | e gn committee) | | | |
| 4. Date of Primary Election Date of General Election 04/02/2006 | Pi sass see attached she ets. | 20U5 MAR 28 | | |
| 5 a. Name of Person Preparing Report | | #H 12 | | |
| b. Daytime Telephone | Please see attached sheets, | <u> </u> | e e e e e e e e e e e e e e e e e e e | |
| 6. WE HEREBY CERTIFY that the information and best of our knowledge, information and befinance Disclosure Act has been deliberated Dated 03/23/2005 | ellet and that no information regulred t | iched schedules is true and corr o be reported by the Louislane (| ect to the Campaign | |
| Chaine and only if repairs of friction than | paign committee) | (225)927-9455 Daytime Telephone Number | , <u>-</u> | |
| Signature of Treasurer, if any | | Daytime Telephone Number | | |
| | | | | |

| Mame of Political Party: Chairperson: Candidate Information Office 35 well As 70898 Candidate Information Office 35 well As 70898 Candidate Information Office 35 well As Particular Party: Chairperson: Candidate Information Office 35 well As 70898 Name of Political Party: Chairperson: Support D Opposed by the Columitate | |
|--|--------|
| Name of Political Party: | İ |
| | |
| | |
| Daytime Telephone (Preparer): Rel of AN. Org. to Comm: | |
| Hamm and Address of Tressurer CAndidate Information Calc Thornton, CPA P.C. Box 88980 Candidate Information CPA So Box 8898 | |
| Batori Rouge LA 70879 | |
| Name of Political Party: |] |
| Chairperson: SUPPORTED OPPOSED by the Committee | ĺ |
| Daytime Telephone (Proparer); Rel of Aff. Org. to Comm: | \neg |
| Name and Address of Person Preparing Report Candidate Information Melissa O'Donnell 1465 Aster Candidate Information Office Sought (Include take of office se well as paris), City, Lown and/or election district) | |
| Baton Rouge LA 70302 | - |
| Martie of Political Party: | |
| Chairperson: SUPPORTED OPPOSED by the Committee | |
| Daytime Telephone (Preparer): 2259279455 Rel of Aff. Org. to Commit | |
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SCHEDULE A: CONTRIBUTIONS (Including In-Kind Contributions)

MAJOR OFFICE CANDIDATES: The following information must be reported for all contributions and in-kind contributions exceeding \$500 received during the last 20 days before the primary election, as well as those received in the last 20 days before the general election if the candidate participates in the general election.

DISTRICT OFFICE CANDIDATES AND ANY OTHER OFFICE CANDIDATES: The following information must be reported for all contributions and in-kind contributions exceeding \$250 received during the last 20 days before the primary election, as well as those received in the last 20 days before the general election if the candidate participates in the general election.

| Name and Address of Contribut (& Decription If In-kind) | tor | | 2. Contributions this R a. Date(s) | eporting Period b. Amount(s) | 3. Valuation # In-Kind |
|---|-----|-------|---------------------------------------|---------------------------------|------------------------|
| MRS. KELLY BYRAM 2840 TUSCANY CIRCLE | | | 03/21/2005 | 1000.00 | 0.00 |
| SHREVEPORT | LA | 71106 | | | |
| MR. KEILY GENE BYRAM 2840 TUSCANY CIRCLE | | | 03/21/2005 | 2500.00 | 0.00 |
| SHREVEPORT | LA | 71108 | | | |